

APPENDIX I

SAMPLE OPERATIONS ORDER WITH ANNEXES

(Classification)

Copy No. ____ of ____ Copies
____ CSH, Med Bde/Gp
____ Corps
Anywhere, USA
112200Z June 19XX
MZ23

OPLAN 1234

References:

- a. Map series 1501, sheets NM 32-5 (FRANKFURT), edition 2, NM 32-8 (MANNHEIM), edition 3, 1:250000 scale.
- b. ____ CSH TSOP.
- c. Medical Brigade/Group (Med Bde/Gp) OPLAN 2987.
- d. ____ Corps OPLAN 222.

Time Zone Used Throughout the Plan: ZULU

Task Organization: Combat Support Hospital

Medical Service, Medical Teams

Medical Service, Surgical Teams

1. **SITUATION.**

a. *Enemy Forces.*

(1) The ____ Corps is opposed by two infantry divisions estimated to be approximately 95 percent strength. These ground forces are supported by a helicopter company and an artillery battery, which is capable of mass artillery barrages within a 10-mile radius and attack helicopter strikes within 20 miles. Intelligence indicates that the full range of radio electronic combat elements will be employed to gather intelligence and to degrade the effectiveness of friendly command and control nets through the use of electronic warfare. The threat has the ability to deliver nuclear weapons and/or chemical agents into the corps support area (CSA). Intelligence also indicates that the threat will employ tactical air (TACAIR), airborne and airmobile regular army units, and local guerilla units in the CSA to disrupt or destroy CSS operations. (OPLAN 1234-____ CSH.)

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- (2) See current intelligence summary.

b. Friendly Forces.

(1) ____ Corps attack 120500 June through elements of the 1st and 2nd Threat Infantry Divisions with two divisions abreast. 1st Division on the left (east) conducts main attack; 2nd Division on the right (west) conducts supporting attack. 3rd Division follows in zone of 1st Division Corps, secures FREISING (QU0364), and MOOSBURG (QU1773), and prepares to continue attack on to S and SW.

(2) Provide hospitalization support to corps units on area basis. Defend the hospital area within the base cluster defense when attacked.

c. Attachments and Detachments.

d. Assumptions.

(1) The ____ CSH with assigned and attached elements will be in place and prepared to support ____ Corps.

(2) There will be air parity.

(3) Both threat and friendly forces possess the capability to initiate nuclear or chemical warfare, limited or full scale, in any combination.

(4) Med Bde/Gp OPLAN 2987 has been implemented.

2. **MISSION.** Provide hospitalization support to the corps.

3. **EXECUTION.**

a. Combat Support Hospital. Provide hospitalization support for corps tactical operations. Render resuscitative care and medical treatment of critically injured or ill patients requiring highly specialized care and surgical and medical services for patients held for definitive treatment.

b. Boundaries. Annex B (Operations Overlay) ____ Corps OPLAN 222.

c. Coordinating Instructions.

(1) This OPLAN is effective for planning upon receipt; executing on order.

(2) All elements provide closing notification upon arrival at designated operating locations with projected operational capability attainment until fully mission capable.

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(3) Units located in CSA will comply with defense and area damage control procedures established by the CSH, Operations Section.

(4) Chemical MOPP-1 is in effect. Be prepared to increase MOPP on short notice.

(5) Operation Security. _____ Annex K, Med Bde/Gp OPLAN 2987 and Annex L, Corps OPLAN 222.

(6) Movement Annex for CSA units to be prepared separately.

4. **SERVICE SUPPORT.** See Annex B (Service Support).

5. **COMMAND AND SIGNAL.**

a. Command.

Combat Support Hospital located vic MA 779705.

b. Signal.

(1) Current SOI in effect.

(2) Minimize; in effect for FM radio traffic until lifted by CSH Commander.

Acknowledge.

CDR

COL

OFFICIAL:

/s/

Annexes:

- A. Operational Overlay
- B. Road Movement
- C. Service Support
- D. Rear Operations

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Annex A to OPORD 1234-____ CSH (Operational Overlay)



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MZ23

Annex B (Road Movement) to Operations Order 1234

References:

- a. Map series 1501, sheets NM 35-2 (FRANKFURT), edition 2, NM 32-8, edition 3, 1:250000 scale.
- b. ____ CSH TSOP.
- c. ____ Med Bde/Gp OPLAN 2987.
- d. ____ Corps OPLAN 222.

Time Zone Used Throughout the Plan: ZULU

1. **SITUATION.**

a. *Enemy Forces.* The enemy's capability to conduct road interdiction through mining and demolition generally along the route is acknowledged. However, it is anticipated that the enemy will limit their interdictions to the intent consistent with meeting specific military objectives in ambush attack operations. The enemy's capability to conduct simultaneous and multiple convoy ambush operations at critical areas exists. However, this is unlikely because of the restriction on convoy movement within the CSA.

b. *Friendly Forces.*

(1) Corps support area units move night of 21-22 June 19XX to assembly area VIC GRAFTON (UV 6302).

(2) 227th Aviation Company provides aerial observation and CAS.

(3) Battery B, 317th Artillery, provides artillery support, as required.

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- (4) CSH, ____ Corps, provides en route medical support.
- (5) Treatment Company, Supply and Transport (S&T) Battalion, provides transportation support, as required.
- 2. **MISSION.** Combat support hospital move commencing 210300 June 19XX to an AO to support ____ Corps tactical mission.
- 3. **EXECUTION.**
 - a. *Concept of Operations.* The CSH conducts a tactical road march in three echelons over two routes to a new AO. First echelon crossing SP 210300 June and last echelon crossing RP 220546 June.
 - b. *Convoy Organization.*
 - (1) Echelon 1: Advanced/Quarterming Party.
 - (2) Echelon 2: Hospital Headquarters, Supply and Service Division, EMT and Triage, OR Control Team, OR A Module, two ICUs, two ICWs, Laboratory, Blood Bank, X-Ray, Pharmacy, two CMSs, Ortho Cast Clinic, Litter Bearer Section, parts of Company Headquarters, Supply and Service Division, PAD, and Nutrition Care Division.
 - (3) Echelon 3: Neuropsychiatric Service, OR B Module, Inpatient Medicine A Module, two ICUs, two ICWs, two MCWs, two CMSs, parts of Company Headquarters, Supply and Service Division, PAD, and Nutrition Care Division.
 - (4) Echelon 4: All remaining elements of the hospital.
 - c. *Tasks to Subordinate Elements.* Supply and Service Division will provide recovery support along the route.
 - d. *Checkpoints.*

CHECKPOINTS	COORDINATES	KILOMETERS BETWEEN CHECKPOINTS
SP	721624	9.8
40	711121	2.4
12	701243	2.3
93	693240	2.1
77	695179	2.1
RP	711234	1.9

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e. Coordinating Instructions.

- (1) Advance/Quartermaster Party assemble CSH dismount point 210200 June.
- (2) Formation: Close Column.
- (3) Time Gap: 8 hours between echelons.
- (4) Appendix 1, Road Movement Table.
- (5) Appendix 2, Route Overlay.

4. SERVICE SUPPORT.

a. Traffic Control (TC).

- (1) *Quartermaster party.* Quartermaster Party will drop two-man TC teams at Critical Points 1, 2, and 4. Military police will be responsible for traffic control points (TCP) at Blue River and in the town of Manly.
- (2) *Recovery.*
 - (a) Units will recover organic vehicles that break down along the route.
 - (b) Heavy Ordnance (Maintenance) Company trail echelon will recover all vehicles beyond self-recovery capability.
- (3) *Medical.*
 - (a) Emergency medical treatment/triage will provide treatment services.
 - (b) Aeromedical evacuation procedures (Medical Annex, TSOP).

5. COMMAND AND SIGNAL.

a. Command.

- (1) Command post and command group with Echelon 2.
- (2) Command post opening and closing times and locations to be announced.

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b. Signal.

- (1) Signal Operation Instructions Index 1-12 in effect.
- (2) Listening silence effective 211300 June.

Acknowledge.

CDR

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/s/

Annexes:

- A. Road Movement Table**
- B. Route Overlay**

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Appendix A (Road Movement Table) to Annex B, OPORD 1234

Map Reference:

Time Zone Used Throughout the Order:

General Data:

- 1. Average Speed:
- 2. Traffic Density:
- 3. Halts:
- 4. Critical Points:
 - a. Starting point:
 - b. Release point:
 - c. Other critical points:
 - d. Route classification:
 - e. Route restrictions:
- 5. Main route to SP:
- 6. Main route to RP:

MARCH UNIT DATE	NO. OF UNIT VEHICLES	CLASS OF HEAVIEST VEHICLES	FROM	TO	ROUTE	CRITICAL POINTS

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Appendix 2 (Route Overlay) to Annex B, OPOD 1234 Annex C (Service Support) to OPLAN 1234, CSH

1. **GENERAL.** This annex provides the support plan for ____ Corps. Combat service support will provide/coordinate through the CSH Staff and the Med Bde/Gp S1 and S4.

2. **MATERIAL AND SERVICES.**

a. Supply.

(1) **Class I.** The COSCOM will operate ration supply points in the CSA for Med Bde/Gp and its supporting units.

(2) **Water.** The DS Supply Company will operate the water points. Water requirements will be coordinated through the Med Bde/Gp S2/S3 and may be located in the CSA.

(3) **Classes II and III.**

(a) Classes II and III.

1. Supply point distribution from DS Supply Company, COSCOM.

2. Request will be submitted to CSH Operations Section.

(b) Class III (bulk).

1. Supply point distribution from any Class III supply point.

2. Allocations will be provided by the Med Bde/Gp S4, when required.

(4) **Class IV.**

(a) Supply point distribution. Selected Class IV materials issued by the S&T Battalion, COSCOM.

(b) Class IV priorities assigned by the COSCOM.

(c) The following controlled items will be requisitioned through command channels.

1. Culvert nestable, 60 feet.

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2. Lumber, softwood, 2 X 4 RL.

(5) Class V.

(a) Ammunition transfer points will be operated by the S&T Battalion, COSCOM.

(b) Units will maintain basic loads.

(6) Class VII.

(a) Selected Class VII will be stocked by the Headquarters and Light Ordnance (Maintenance) Company.

(b) Requests to fill TOE shortages will be submitted to Med Bde/Gp S4 citing TOE authority. Battle loss replacement will be requested by submitting Daily Battle Loss Reports in accordance with field standing operating procedures. The Med Bde/Gp S4 will forward request to Corps Assistant Chief of Staff (Logistics) (G4).

(7) Class VIII. Medical battalion, logistics, provides Class VIII support on a supply point distribution basis.

(8) Class IX.

(a) Direct Support Maintenance Company provides repair parts support.

(b) Stockage objectives. DS. 15 days of authorized stockage list items.

(c) Major critical shortages exist for the following item:

—Truck, utility, ¾-ton, M1009-transmissions.

(d) Cannibalization. Unserviceable end items and major assemblies will be evacuated to the Headquarters and Light Ordnance (Maintenance) Company, CSA, collection points. Controlled cannibalization may be performed at the discretion of the hospital commander.

(9) Class X. Civil relief supply requirements will be approved by Med Bde/Gp and coordinated through the security, plans, and operations (SPO) office.

(10) Maps are provided by the Med Bde/Gp S4.

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(11) Captured enemy materials.

(a) Will be reported to Med Bde/Gp S2 for disposition instructions.

(b) Enemy rations and medical supplies will not be utilized or consumed by Med Bde/Gp personnel.

(12) Excess supplies. All elements will report excess supplies through supply channels to Med Bde/Gp S4 for disposition instructions.

b. Transportation.

(1) All main supply routes (MSR) are two-way.

(2) Ten or more vehicles dispatched to the same destination from one point of origin constitutes a convoy.

(3) Elements coordinate convoy movements with the Med Bde/Gp SPO.

(4) Emergency resupply requirements will be submitted through command channels.

c. Services.

(1) Construction efforts will be limited to minimum essential required.

(2) Corps units will evacuate remains to the nearest MA collection point. Collection points will be operated by the CSA.

(3) Clothing exchange and bath services will be coordinated by Med Bde/Gp S4.

d. Maintenance.

(1) Maintenance collection points will be established in the CSA by the DS Maintenance Company.

(2) Priority of maintenance is to the 1st Division.

(3) Repair time limits: 48 hours. If an item will be deadlined in excess of 24 hours and otherwise qualifies for float, it may be exchanged for a serviceable like item at the discretion of the CSH commander in coordination with Med Bde/Gp commander.

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3. **MEDICAL EVACUATION AND HOSPITALIZATION.**

a. Evacuation.

- (1) Corps holding policy is 72 hours.
- (2) Primary means of evacuation is ground ambulance.
- (3) Preferred means of evacuation is air ambulance.

b. Hospitalization.

- (1) Medical facilities forward of division boundaries will camouflage.
- (2) Hospitalization will be provided by the ____ CSH.

4. **PERSONNEL.**

a. Maintenance of Unit Strength. Replacements will be assigned to units based upon priority of the commander.

b. Personnel Management.

(1) Enemy prisoner of war and civilian internees. Medical brigade/group evacuates EPW to corps collection points. Enemy prisoners of war from an NBC unit will be reported immediately to the Med Bde/Gp command channel.

(2) Military prisoners. Corps headquarters will retain military prisoners until sentences are approved.

c. Development and Maintenance of Morale.

- (1) Morale and personnel services.

(a) Postal, personnel/administrative, and finance services provided to Med Bde/Gp by corps contact teams.

(b) Legal services will be requested from Med Bde/Gp through the S1.

- (2) Mortuary affairs.

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(a) Army cemeteries will not be established.

(b) Concurrent return program is in effect.

(c) Isolated or mass burials are not authorized unless approved by the corps commander. In emergencies, commanders may request such burials through TOC channels. When authorized, report number of remains, identity (by nationality, sex, age grouping, and name, if possible), and cause of deaths to the Med Bde/Gp, Headquarters, ATTN: S1, within 48 hours of burial.

(3) Maintenance of discipline, law, and order.

(a) Commanders will give special attention to the problems of illegal sale and bartering of military supplies and equipment. Incidents will be reported to appropriate criminal investigation or military police unit.

(b) Claims by indigenous personnel will be reported to the Med Bde/Gp SPO.

5. **CIVIL-MILITARY OPERATIONS.**

a. Corps Assistant Chief of Staff (Civil Affairs) (G5) provides civil affairs support.

b. ALL civil affairs related activities will be coordinated through Med Bde/Gp Civil-Military Operations.

6. **MISCELLANEOUS.**

a. Subordinate elements submit Daily Battle Loss Report twice each day to the Med Bde/Gp and CSH. Reporting periods are 0001 to 1200, due not later than 1400 hours; 1201 to 2400 hours, due not later than 0400 the following day.

b. See Reports Standing Operating Procedures.

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Annex D (Rear Battle Operations) to OPORD 1234 CSH

1. **SITUATION.** OPORD 1234 CSH.
2. **MISSION.** Combat support hospital provides hospitalization support within the CSA.
3. **EXECUTION.**

a. Concept of Operations. Units in the CSA will establish individual bases for rear security. The base cluster will have an appointed commander who will form and operate the base defense operations center on a 24 hour basis. Base commanders are responsible for their own base defense and base damage control. Base cluster commander will coordinate and supervise base defense within cluster. Under direction of Med Bde/Gp SPOs, supporting military police will respond to bases under attack by Level II forces. The Med Bde/Gp SPO will request commitment of ____ Corps radio frequency should a Level II threat attack occur in the CSA. Base commanders will request Level II support from the CSA base clusters operations center. Any rear operations liaison or technical support provided by the corps will be collocated with Med Bde/Gp headquarters.

b. Base Cluster Operations Center/Tactical Operations Center.

- (1) Provide Level I protection.
- (2) Request Level II support.
- (3) Request fire support/TACAIR.
- (4) Request area damage control support.

c. Medical Brigade/Group Security, Plans, and Operations.

- (1) Disseminate tactical information to CSH Operations Section.
- (2) Forward request for assistance from CSH.
- (3) Forward priority communications from CSH.
- (4) Monitor base defense preparedness.

d. Coordinating Instructions.

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(1) Reporting enemy activities. Individual units within a base defense cluster will report all observed enemy acts and any locally gathered intelligence data to the base defense operations center and next higher headquarters.

(2) Barrier and denial. No barrier and denial operations will be conducted without approval of the CSH headquarters.

4. **SERVICE SUPPORT.** Annex C.

5. **COMMAND AND SIGNAL.**

a. Command. Command of rear operations in the CSA as directed by CSA base defense operations center (MA 676988).

b. Signal. Current SOI in effect.

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